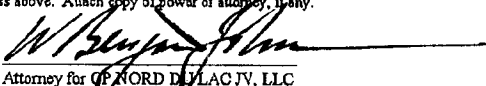


**EXHIBIT A**

COPY

B 10 (Official Form 10) (12/07)

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA		PROOF OF CLAIM
Debtor against which claim is asserted: (Check only one box below:)		
<input checked="" type="checkbox"/> Circuit City Stores, Inc. (Case No. 08-35653)	<input type="checkbox"/> CC Distribution Company of Virginia, Inc. (Case No. 08-35659)	<input type="checkbox"/> Abbott Advertising, Inc. (Case No. 08-35665)
<input type="checkbox"/> Circuit City Stores West Coast, Inc. (Case No. 08-35654)	<input type="checkbox"/> Circuit City Stores PR, LLC (Case No. 08-35660)	<input type="checkbox"/> Maryland MN, LLC (Case No. 08-35666)
<input type="checkbox"/> InterTAN, Inc. (Case No. 08-35655)	<input type="checkbox"/> Circuit City Properties, LLC (Case No. 08-35661)	<input type="checkbox"/> Patapoco Designs, Inc. (Case No. 08-35667)
<input type="checkbox"/> Ventoux International, Inc. (Case No. 08-35656)	<input type="checkbox"/> Orbyx Electronics, LLC (Case No. 08-35662)	<input type="checkbox"/> Sky Venture Corporation (Case No. 08-35668)
<input type="checkbox"/> Circuit City Purchasing Company, LLC (Case No. 08-35657)	<input type="checkbox"/> Kinzer Technology, LLC (Case No. 08-35663)	<input type="checkbox"/> XStuff, LLC (Case No. 08-35669)
<input type="checkbox"/> CC Aviation, LLC (Case No. 08-35658)	<input type="checkbox"/> Courcheval, LLC (Case No. 08-35664)	<input type="checkbox"/> PRAHS, INC. (Case No. 08-35670)
NOTE: This form should not be used to make a claim for administrative expenses arising after the commencement of the case. A request for payment of an administrative expense must be filed pursuant to 11 U.S.C. § 503(c).		
Name of Creditor (the person or other entity to whom the debtor owes money or property): CP NORD DU LAC JV, LLC		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: CP NORD DU LAC JV, LLC c/o Heather A. Lee Durr & Forman LLP 420 N. 20th Street, Suite 3400 Birmingham, AL 35203 Telephone number: (205) 251-3000		Court Claim Number: _____ (If known) Filed on: _____
Name and address where payment should be sent (if different from above):  Telephone number: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
1. Amount of Claim as of Date Case Filed: \$ 974,851.79 If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtors business, whichever is earlier — 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan — 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use — 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units — 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). Amount entitled to priority: \$ _____ *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
2. Basis for Claim: Rejection of Lease (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate: % _____ Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: _____		
Date: 1-28-2009 Signature: the person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  Attorney for CP NORD DU LAC JV, LLC		FOR COURT USE ONLY <b>RECEIVED</b> JAN 30 2009 KURTZMAN CARSON CONSULTANTS

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

**CP NORD DU LAC JV, LLC**  
**Circuit City Stores, Inc.**  
Lease Rejection Damages Calculation

	<u>ANNUAL CHARGES</u>	<u>TOTAL CHARGED OVER LEASE TERM</u>
Minimum Rent		
Years 1-5	\$304,500.00	\$1,522,500.00
Years 6-10	\$324,800.00	\$1,624,000.00
Years 11-15	\$345,100.00	\$1,725,500.00
<b>TOTAL MINIMUM RENT</b>		<b>\$4,872,000.00</b>
Additional Charges (based on 20,300 square feet)		
Common Area Maintenance (\$1.50/square foot)		
Partial First Year	\$10,150.00	
Year 1	\$30,450.00 ^	
Year 2	\$31,363.50 ^	
Year 3	\$32,304.41 ^	
Year 4	\$33,273.54 ^	
Year 5	\$34,271.74 ^	
Year 6	\$35,299.90 ^	
Year 7	\$36,358.89 ^	
Year 8	\$37,449.66 ^	
Year 9	\$38,573.15 ^	
Year 10	\$39,730.34 ^	
Year 11	\$40,922.25 ^	
Year 12	\$42,149.92 ^	
Year 13	\$43,414.42 ^	
Year 14	\$44,716.85 ^	
Year 15	\$46,058.36 ^	
Total Common Area Maintenance		\$576,486.93
Insurance Cost (\$0.45/square foot)	\$9,135.00 *	\$137,025.00
Taxes (\$1.50/square foot)	\$30,450.00 *	\$456,750.00
Tenant's Contribution to CDD Levy (\$1.50/square foot)	\$30,450.00 *	\$456,750.00
<b>TOTAL ADDITIONAL CHARGES</b>		<b>\$1,050,525.00</b>
<b>Total Charges Due Under the Lease</b>		<b>\$6,499,011.93</b>
<b>FIFTEEN PERCENT (15%) OF THE TOTAL CHARGES DUE UNDER THE LEASE</b>		<b>\$974,851.79</b>

^ Amounts based on 3% annual increase provided in lease.

\* Amounts based on initial costs in lease.